Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER California Hospitals Committee on Issues, (CHCI) Sponsored by California Association of Hospitals and Health Systems (CAHHS)		Date of This Filing03/17/2010	Date Stamp	CALIFORNIA FORM 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 880212	Report No163104-01		For Official Use Only
STREET ADDRESS		Amendment to Report No.	Page 1 of 2	
CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages2		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/10/2010	California Association of Hospitals and Health Systems Sacramento, CA 95814	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$83,333.00
03/10/2010	California Association of Hospitals and Health Systems Sacramento, CA 95814	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$83,333.00
01/10/2010	California Association of Hospitals and Health Systems Sacramento, CA 95814	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$83,333.00

*Contributor Codes	
IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC) OTH - Other	SCC - Small Contributor Committee

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

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CITY Sacramento	STATE ZIP CODE CA 95814	(explain below) No. of Pages2			

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
03/15/2010	California Dream Team El Segundo, CA 90245	California Dream Team Controlled by Governor Schwarzenegger	\$250,000.00	06/08/2010
	ID# 1261406			
03/15/2010	Yes on 14 - Californians for an Open Primary San Rafael, CA 94901	Yes on 14 - Californians for an Open Primary	\$250,000.00	06/08/2010
	ID# 1322507			

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC